

Bayer 7731.3-KGB  
Le A 26 501 US-03

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant : Reiner Fischer et al.  
Serial No. : 08/470,563  
Filed : June 6, 1995  
For : N-ARYL-SUBSTITUTED NITROGEN-CONTAINING  
HETEROCYCLES, PROCESSES AND NOVEL  
INTERMEDIATES FOR THEIR PREPARATION, AND  
THEIR USE AS HERBICIDES AND PLANT GROWTH  
REGULATORS  
Art Unit : TBA  
Examiner : TBA

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May 12, 2000

Assistant Commissioner  
For Patents  
Washington, D.C. 20231

S I R:

**COMMUNICATION RE: FILING OF DECLARATION ON  
A DATE LATER THAN THE FILING DATE OF THE APPLICATION**

This is in response to the Notice to File Missing Parts of Application under 37 CFR 1.53(d) dated January 19, 2000, in the above-identified application. A copy of said Notice is attached hereto.

It is requested that the papers submitted herewith be joined up with the papers previously filed in this Application.

Applicant is:

☐ a small entity ☐ verified statement attached

☒ other than a small entity ☐ verified statement filed

It is requested that the surcharge for the filing of the Declaration be charged to the

undersigned's **Deposit Account No. 14-1263**.

Please charge:

☐ \$ 65.00 for small entity

☒ \$130.00 for other than small entity.

+ \$282.00 to complete the basic filing fee

+ \$152.00 for 8 dependent claims over 20

**TOTAL** **\$564.00**

An extra copy of this communication is appended hereto for accounting purposes.

**CONDITIONAL PETITION FOR EXTENSION OF TIME**

If any extension of time for this response is required, applicant requests that this be considered a petition therefor. Please charge the required Petition fee to Deposit Account No. 14-1263.

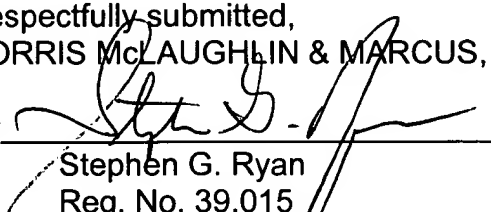
**ADDITIONAL FEE**

Please charge any insufficiency of fees, or credit any excess to our Deposit Account

No. 14-1263.

Respectfully submitted,  
NORRIS McLAUGHLIN & MARCUS, P.A.

By

  
Stephen G. Ryan  
Reg. No. 39,015

SGR:acd

Enc. - Declaration and Power of Attorney  
- Copy of Notice of Missing Parts

660 White Plains Road  
Tarrytown, N.Y. 10591  
(914) 332-1700

I hereby certify that this correspondence is being deposited with the United States Postal Services as first class mail in an envelope addressed to: Asst. Commissioner For Patents, Washington, D.C. 20231 on 5/12/00.

NORRIS McLAUGHLIN & MARCUS, P.A.

By



Date

5/12/00

**FREE TRANSMITTAL**  
for FY 2000

Patent fees are subject to annual revision.  
Small Entity payments must be supported by a small entity statement.  
Other large entity fees must be paid. See Forms PTO/SB/09-12.  
See 37 C.F.R. §§ 1.27 and 1.28.

MAY 17 2000

TOTAL AMOUNT OF PAYMENT (\$) 944.00

## Complete if Known

Application Number 08/470,563  
Filing Date 06/06/95  
First Named Inventor Fischer et al.  
Examiner Name TBA  
Group / Art Unit TBA  
Attorney Docket No. Bayer 7731.3

## METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number Norris McLaughlin &amp; Marcus

Deposit Account Name 14-1263

- ☒ Charge Any Additional Fee Required  
Under 37 CFR §§ 1.16 and 1.17

2. ☐ Payment Enclosed:  
☐ Check ☐ Money Order ☐ Other

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 690	201 345	Utility filing fee	
106 310	206 155	Design filing fee	
107 480	207 240	Plant filing fee	
108 690	208 345	Reissue filing fee	
114 150	214 75	Provisional filing fee	

SUBTOTAL (1) (\$)

## 2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20** =	X	
Multiple Dependent	-3** =	X	

\*\*or number previously paid, if greater; For Reissues, see below

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
103 18	203 9	Claims in excess of 20	
102 78	202 39	Independent claims in excess of 3	
104 260	204 130	Multiple dependent claim, if not paid	
109 78	209 39	** Reissue independent claims over original patent	
110 18	210 9	** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$)

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

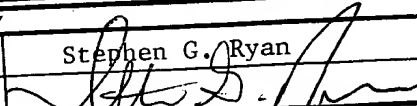
Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath	130.00
127 50	227 25	Surcharge - late provisional filing fee or cover sheet.	
139 130	139 130	Non-English specification	
147 2,520	147 2,520	For filing a request for reexamination	
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	
115 110	215 55	Extension for reply within first month	380.00
116 380	216 190	Extension for reply within second month	
117 870	217 435	Extension for reply within third month	
118 1,360	218 680	Extension for reply within fourth month	
128 1,850	228 925	Extension for reply within fifth month	
119 300	219 150	Notice of Appeal	
120 300	220 150	Filing a brief in support of an appeal	
121 260	221 130	Request for oral hearing	
138 1,510	138 1,510	Petition to institute a public use proceeding	
140 110	240 55	Petition to revive - unavoidable	
141 1,210	241 605	Petition to revive - unintentional	
142 1,210	242 605	Utility issue fee (or reissue)	
143 430	243 215	Design issue fee	
144 580	244 290	Plant issue fee	
122 130	122 130	Petitions to the Commissioner	
123 50	123 50	Petitions related to provisional applications	
126 240	126 240	Submission of Information Disclosure Stmt	
581 40	581 40	Recording each patent assignment per property (times number of properties)	
146 690	246 345	Filing a submission after final rejection (37 CFR § 1.129(a))	
149 690	249 345	For each additional invention to be examined (37 CFR § 1.129(b))	

Other fee (specify) to complete the basic filing Fee 282.00

Other fee (specify) for 8 dep. claims over 20 Fee 152.00

SUBTOTAL (3) (\$944.00)

\* Reduced by Basic Filing Fee Paid

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Stephen G. Ryan	Registration No. (Attorney/Agent)	39,015
Signature		Telephone	914 332 1700
		Date	5/12/00

## WARNING:

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



Please type a plus sign (+) inside this box → ☒

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Approved for use through 9/30/00. OMB 0651-0031  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

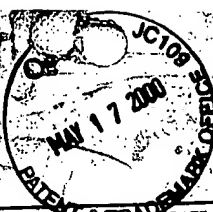
<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	08/470,563
	Filing Date	06/06/95
	First Named Inventor	Fischer et al.
	Group Art Unit	TBA
	Examiner Name	TBA
	Attorney Docket Number	Bayer 7731.3
Including this page Total Number of Pages in This Submission		

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	1. Communication Re: Filing of Declaration
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	2. Declaration & POA
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	3. Part 2 - Notice to File Missing Parts of Application
<input type="checkbox"/> Response to Missing Parts/Incomplete Application	Remarks	4. Petition for EOT
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Norris McLaughlin & Marcus
Signature	Stephen G. Ryan
Date	5/12/00

CERTIFICATE OF MAILING		
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: 5/12/00		
Typed or printed name	Adrienne C. Dorio	
Signature	Adrienne C. Dorio	Date 5/12/00

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



UNITED STATES DEPARTMENT OF COMMERCE  
Patent and Trademark Office  
Address: COMMISSIONER OF PATENTS AND TRADEMARKS  
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	FIRST NAMED APPLICANT	ATTORNEY/DOCKET NO./TITLE
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08/470,563    06/06/95    FISCHER    R    BAYER-7731.3

MARK W RUSSELL  
660 WHITE PLAINS ROAD  
TARRYTOWN NY 10591-5144

03A2/0119

NOT ASSIGNED

0000  
DATE MAILED:

01/19/00

**NOTICE TO FILE MISSING PARTS OF APPLICATION**  
**Filing Date Granted**

An Application Number and Filing Date have been assigned to this application. The items indicated below, however, are missing. Applicant is given TWO MONTHS FROM THE DATE OF THIS NOTICE within which to file all required items and pay fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a). If any of items 1 or 3 through 5 are indicated as missing, the SURCHARGE set forth in 37 CFR 1.16(e) of ☐ \$65.00 for a small entity in compliance with 37 CFR 1.27, or ☐ \$130.00 for a non-small entity, must also be timely submitted in reply to this NOTICE to avoid abandonment.

If all required items on this form are filed within the period set above, the total amount owed by applicant as a ☐ small entity (statement filed) ☐ non-small entity is \$ 120.

- ☐ 1. The statutory basic filing fee is:
- ☐ missing.
  - ☐ insufficient.
- Applicant must submit \$ 242 to complete the basic filing fee and/or file a small entity statement claiming such status (37 CFR 1.27).
- ☐ 2. Additional claim fees of \$ \_\_\_\_\_, including any multiple dependent claim fees, are required.
- \$ \_\_\_\_\_ for \_\_\_\_\_ independent claims over 3.
  - \$ 152 for 8 dependent claims over 20. *100.00 has already been paid*
  - \$ \_\_\_\_\_ for multiple dependent claim surcharge.

Applicant must either submit the additional claim fees or cancel additional claims for which fees are due.

- ☒ 3. The oath or declaration:
- ☐ is missing or unexecuted.
  - ☐ does not cover the newly submitted items.
  - ☐ does not identify the application to which it applies.
  - ☐ does not include the city and state or foreign country of applicant's residence.
- An oath or declaration in compliance with 37 CFR 1.63, including residence information and identifying the application by the above Application Number and Filing Date is required.

- ☐ 4. The signature(s) to the oath or declaration is/are by a person other than inventor or person qualified under 37 CFR 1.42, 1.43 or 1.47.  
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.

- ☐ 5. The signature of the following joint inventor(s) is missing from the oath or declaration:

An oath or declaration in compliance with 37 CFR 1.63 listing the names of all inventors and signed by the submitted inventor(s), identifying this application by the above Application Number and Filing Date, is required.

- ☐ 6. A \$50.00 processing fee is required since your check was returned without payment (37 CFR 1.21(m)).
- ☒ 7. Your filing receipt was mailed in error because your check was returned without payment.
- ☐ 8. The application does not comply with the Sequence Rules.  
See attached "Notice to Comply with Sequence Rules 37 CFR 1.821-1.825."
- ☐ 9. OTHER:

Direct the reply and any questions about this notice to "Attention: Box Missing Parts."

**A copy of this notice MUST be returned with the reply.**

Customer Service Center  
Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE

05/19/2000 STEFERRA 000001 41 1419263 08470563  
130.00 CH  
434.00 CH